ARIZONA STATE D	2
ARIZONA STATE BOARD OF HEALTH  1. PLACE OF BIRTH  BUREAU OF VITAL STATISTICS  State File No	
STANDARD CERTI	FICATE OF BIRTH Registered No
County / Vula	State Orizona
District or Township	1
1/1 A . ·	or Village
City No	
2. Full name of child	
3. Sex of Child   To be answered ONLY   4. Twin, triplet or other.	supplemental report, as directed
in event of plural	6. Legitimate? 7. Date
, 5. 140., in order of birth	Month A n
8. FATHER Full name	14. MOTHER Day Year
Deciderio Honoro	Full maiden name 1
9. Residence	Jarrana Oslata
(Usual place of abode)	15. Residence (Usual place of abode)
If non-resident, give place and state.	If non-resident, give place and state.
10. Color or race	16. Color or race
merucan 11. Age at last birthday 44 (Years)	
	ment can 17. Age at last birthday 42 (Years)
12. Birthplace (city or place) Durango mexico	18. Birthplace (city or place)
(State or country)	(State or country)
13. Occupation Mine	
Nature of industry	19. Occupation Houseway
Mining	Nature of industry
20. Number of children of this mother	
confiling on time of birth of child herein (b) Born alive bu	t now dead the beautions taken against oph-
	3 Born dead
I hereby certify that I attended the birth of this child, who was	
When there was no attending physician) (Bo	orn alive or stillborn) at m. on the date above stated.
etc. should make this return	Louril m lovon 15
child is one that neither breathes nor shows other evidence of life after birth.	(1) (
Given name added from	
a supplemental report.  Month, day, year  Address Miami, Grusoug  Filed Anne II 18	
Riled A AA	ne 11 & 0 15
Registrar.	(8° 6-0)m
Registrar.	
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